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APPLICANTS

Eswaran Krishnan Iyer, Mumbai, INDIA;
 Dilip Gopalkrishna Saoji, Aurangabad, INDIA;
 Jahantil Rasendrakumar Jha, Mumbai, INDIA;

**** CONTINUING DATA *******

This application is a 371 of PCT/IB03/02949 07/24/2003

**** FOREIGN APPLICATIONS *******

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY INDIA	SHEETS DRAWING	TOTAL CLAIMS 72	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

58478

TITLE

Oral compositions for treatment of diseases

FILING FEE RECEIVED 3330	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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